



United States  
Environmental Protection Agency  
Washington, DC 20460

☐ Registration  
☒ Amendment  
☐ Other

OPP Identifier Number

## Application for Pesticide - Section I

1. Company/Product Number  
87508 / 87508-2

2. EPA Product Manager  
Demson Fuller

3. Proposed Classification  
☒ None ☐ Restricted

4. Company/Product (Name)  
Odorstar LLC / NosGUARD SG

PM#  
32

5. Name and Address of Applicant (Include ZIP Code)

OdorStar LLC  
4041 SW 47th Ave  
Fort Lauderdale, FL 33314

☐ Check if this is a new address

6. Expedited Review. In accordance with FIFRA Section 3(c)(3)(b)(i), my product is similar or identical in composition and labeling to:

EPA Reg. No. \_\_\_\_\_

Product Name \_\_\_\_\_

## Section - II

☒ Amendment - Explain below.

☐ Resubmission in response to Agency letter dated \_\_\_\_\_

☐ Notification - Explain below.

☐ Final printed labels in response to  
Agency letter dated \_\_\_\_\_

☐ "Me Too" Application.

☐ Other - Explain below.

Explanation: Use additional page(s) if necessary. (For section I and Section II.)

Please see cover letter.

## Section - III

1. Material This Product Will Be Packaged In:

Child-Resistant Packaging  
☐ Yes\*  
☒ No

Unit Packaging  
☐ Yes  
☒ No

Water Soluble Packaging  
☐ Yes  
☒ No

2. Type of Container

☒ Metal  
☐ Plastic  
☐ Glass  
☐ Paper  
☐ Other (Specify) \_\_\_\_\_

\* Certification must  
be submitted

If "Yes"  
Unit Packaging wgt.

No. per  
container

If "Yes"  
Package wgt

No. per  
container

3. Location of Net Contents Information

☒ Label ☐ Container

4. Size(s) Retail Container

see label

5. Location of Label Directions

☒ On Label  
☐ On Labeling accompanying product

6. Manner in Which Label is Affixed to Product

☒ Lithograph  
☐ Paper glued  
☐ Stenciled

☐ Other \_\_\_\_\_

## Section - IV

1. Contact Point (Complete items directly below for identification of individual to be contacted, if necessary, to process this application.)

Name  
Brian Hogan

Title  
Agent

Telephone No. (Include Area Code)  
330-620-4967

## Certification

I certify that the statements I have made on this form and all attachments thereto are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

6. Date Application  
Received  
(Stamped)

2. Signature

*Brian Hogan*

3. Title  
Agent

4. Typed Name

Brian Hogan

5. Date

4/12/2021